## BIRCH, ST. ART, KOLASCH & C.CH, LLP

P.O. Box 747 • Falls Church, Virginia 22040-0747

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

ATTORNEY DOCKET NO. 3347-101PCT

PLEASE NOTE: YOUMUST COMPLETE THE FÖLLOWING:

Page

## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	Pharmaceutical	Composition Cont	aining Plasma Prot	on the invention entitled:		
Fill in Appropriate			TIUSMA PIO	<u>-ein</u>		
Information —	the specification of which is att	ached hereto. If not attached beauty				
For Use	the specification of which is attached hereto. If not attached hereto, the specification was filed on					
Without Specification	United States Appl	ication Number		as		
Attached: O11	and amanded					
/ 01.	the specification was	filed on September 17, tion Number PCT/HU98/( Article 19 on	(if app	licable); and/or		
	amendad und a por	tion Number PCT/HU98/	00086	as PCT		
JUN 3	0 1999 Inched under PCT	Article 19 on		(if applicable)		
1	I hereby state that I have	reviewed and understand the content ferred to above.	s of the character it is a	(ii applicable)		
A.	amended by any amendment re	ferred to above.	s of the above identified specification	n, including the claims, as		
SATENT & TRAC	EMARK Vacknowledge the duty to d	isclose information which is material to	patentability as defined in Title 37, C	ode of Federal Regulations,		
	I do not know and do not believe the same was arrest.					
	thereof, or patented or described in any printed publication in any country before my or our invention to this application, that the same was not in public use or on sale in the United States of America before my or our invention thereof or more than one year prior					
	application, that the invention has not been not been application, that the invention has not been application, that the invention has not been application.					
	application in any country foreign to the United States of this					
	more than twelve months (six months for decided on all application filed by me or my legal representatives or assigns					
	this invention has been filed in any country foreign to the United Section 6.4.					
	or assigns, except as follows.					
	I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent.					
•	inventor's certificate listed below and have also identified below any foreign application for patent or filing date before that of the application on which priority is claimed:					
Insert Priority	Prior Foreign Application	on(s)				
Information:	HU P 97 01554			Priority Claimed		
(if appropriate)	(Number)	Hungary (Country)	Sept. 18, 1997			
		(Country)	(Month / Day / Year Filed)	Yes No		
	(Number)	(Country)	(M. 4.15)	_ 🗆 🗀		
		(======================================	(Month / Day / Year Filed)	Yes No		
	(Number)	(Country)	(Month / Day / Year Filed)	_ 🗓 🗖		
		•	(Month? Day / Tear Filed)	Yes No		
	(Number)	(Country)	(Month / Day / Year Filed)	- ☐ ☐ Yes No		
	I hamber 11: 4 - 4					
Insert Provisional	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.					
Application(s): → (if any)						
(II aliy)		(Application Number)		(Filing Date)		
	(Application Number) All Foreign Applications, if any for any Patent or Inverse of Control (Filing Date)					
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:					
T B	Country					
Insert Requested Information:		Application Nun	nber Date of Filin	ng (Month / Day / Year)		
(if appropriate)				·		
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s) listed below and,					
	insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, \$112 Lagrangian to the control of the claims of this application in the prior United States and/or PCT application in					
	the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which					
Insert Prior U.S.	is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of this application and the national or PCT international filing date of this application.					
Application(s):	the prior application and the national or PCT international filing date of this application:					
(if any) →	(Application Number)					
	· · · · · · · · · · · · · · · · · · ·	(Filing Date)	(Status — patented,	pending, abandoned)		
	(Application Number)					
Page 1 of 2		(Filing Date)	(Status — patented	nonding about a		

3347-101PCT ing attorneys to prosecute this application and/or ional application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

Correspondence to: BIRCH, STEWART, KOLASCH & BIRCH, LLP

P.O. Box 747 • Falls Church, Virginia 22040-0747

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE: YOUMUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

j <sup>r</sup>					
Full Name of First or Sole Inventor: Insert Name of Inventor Insert Date This	GIVEN NAME FAMILY NAME  Lajos HEGEDUS	INVENTOR'S SIGNATURE  X 402092 V	DATE*		
Document is Signed  Insert Residence Insert Citizenship	Residence (City, State & Country)  Budapest, Hungary  POST OFFICE ADDRESS (Complete Street Address including City, Sta	te & Country)	Hungarian .		
Insert Post Office Address	H-1121 Eotvos ut 47 Buda	•			
Full Name of Third Inventor, if any: see above	GIVEN NAME  Krisztina KREMPELS Residence (City, State & Country)  Budapest, Hungary POST OFFICE ADDRESS (Complete Street Address including City, Stat  H-1188 Ady E. ut 204 Budap  GIVEN NAME FAMILY NAME  Krisztina PAAL  Residence (City, State & Country)  Budapest, Hungary POST OFFICE ADDRESS (Complete Street Address including City, State	INVENTOR'S SIGNATURE  X Paal ( L'hhiha	DATE*  CITIZENSHIP  Hungarian  CITIZENSHIP  CITIZENSHIP  Hungarian		
Full Name of Fourth Inventor, if any see above	H-1025 Felsozoldmali ut 80  GIVEN NAME FAMILY NAME  Gabor PETHO  Residence (City, State & Country)  Budapest. Hungary	Budapest, Hungary	DATE·  ×6/2/99  CITIZENSHIP  Hungarian		
	POST OFFICE ADDRESS (Complete Street Address including City, State H-1225 Kassai ut 10 Bud				
ull Name of Fifth Inventor, if any see above	GIVEN NAME FAMILY NAME	INVENTOR'S SIGNATURE	DATE*		
	Residence (City, State & Country)  POST OFFICE ADDRESS (Complete Street Address including City, State	& Country)	CITIZENSHIP		
ge 2 of 2					